

The Hotline Outcomes Assessment Study Final Report - Phase I

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Table of Contents

I.	Introduction to the Study	1
II.	Research Methodology	3
III.	Overall Effectiveness of Hotlines	9
A.	Analysis of LSC Data	9
B.	Perceptions of Managers and Directors	17
C.	Client Satisfaction Surveys	27
IV.	Issues Relating to Hotline Staffing, Implementation, and Operation.....	29
A.	Staffing.....	30
B.	Implementation and Operation.....	35
V.	Conclusions.....	45

Appendix A: Interviewed Hotline Programs

Appendix B: Phase I Interview Protocol

Appendix C: Case Service Report (CSR) Form

I. Introduction to the Study.....

In recent years, a growing number of providers of civil legal assistance to low-income people have begun operating *telephone intake, legal advice, brief service, and referral systems* as a central feature of their services. These systems, generally called “Hotlines,” allow eligible callers to speak directly to a legal worker who can analyze the caller’s problem and provide legal advice, information, brief services, or referral, as appropriate. Hotline systems differ from traditional intake systems in their use of telephone rather than in-person interviews and their focus on providing immediate legal assistance to clients, for those categories of problems that can be resolved without extended representation.¹

Originally, the Hotline model was most frequently used by programs providing legal services to the elderly. Since the late 1980s, however, a number of programs serving a general low-income population have adopted Hotline-type systems. In some cases, the Hotline supplements a traditional walk-in intake system. In other programs, the Hotline serves as the primary intake system – that is, the primary method through which low-income people contact the program to seek assistance.

¹ Throughout this report the term “Hotline” is used to describe *telephone intake, legal advice, brief service, and referral systems*. We used the following question to identify eligible Hotlines for this study: “Does the system allow income-eligible callers to talk directly to a legal worker who can analyze the caller’s legal problem and provide legal advice, information, and brief services, as appropriate, at the time of the call, or with a return call?”

It should be noted that some attorneys who work on or run a “Hotline” object to the term. They feel that it implies something less than true legal services. Others point out that the term is imprecise because it fails to distinguish between programs that provide only advice and referral services, sometimes on limited areas of the law, and those that function as intake systems for legal services programs. Nonetheless, the term has become a common shorthand for *telephone intake, legal advice, brief service, and referral systems*, and is used as such in this report.

Hotline systems have become increasingly common in programs funded by the federal Legal Services Corporation (LSC)² since 1996, when Congress enacted a cut of approximately 30 percent in LSC funding and imposed a number of new restrictions on LSC-funded programs. LSC itself has promoted the model as a way for its grantees to respond to client need in a period of diminished resources. Historically, more than two-thirds of the cases handled by LSC-funded programs are for advice and counsel, referral, or brief service. LSC believes that these tasks can be performed most effectively through a telephone-based system, supported by appropriate computer software and staffed by advocates specially trained in the provision of advice and referral services. Other funders, managers, and experts in the delivery of legal services have reached similar conclusions.

Nevertheless, many legal services providers have remained skeptical about the effectiveness of the Hotline model, questioning the adequacy of telephone interviews, the effectiveness of telephone advice and brief service in resolving clients' problems, and the program's ability to provide both Hotline and extended services. They argue that adopting the Hotline model will inevitably require resources to be shifted away from full-service representation. In their view, such a shift will reduce the level of services that produce a significant impact on the individual client and the client community as a whole, in favor of services that have minimal impact on individual clients and none on the community as a whole.

To date, the only evidence on the debate has come from client satisfaction surveys and reviews of caseload statistics by individual programs operating Hotlines. There has been no broad-based, independent study of the effect that adopting a Hotline has on the level of advice, referral services, and the level of extended services.

² LSC is an independent corporation that receives funding from Congress to provide civil legal assistance to low-income people. LSC does not provide services directly, but awards grants through a competitive process to approximately 270 local programs, which together serve every county in the United States. Local programs are independent corporations with their own local Board of Directors. They raise funds from other sources as well, such as state and local governments, foundations, IOLTA (Interest on Lawyer Trust Account) programs, and individual donors. They set local priorities and decide how services will be provided, subject to federal requirements. Although not all legal services programs are LSC-funded, LSC is the single most significant funder of legal services in the country.

The Center for Policy Research (CPR) was retained to conduct an independent assessment of Hotlines. The study was designed to collect information on the implementation and provision of Hotline services, and to generate empirical information that will help resolve some of the debates between proponents and critics of Hotlines.

The Hotline Outcome Assessment Study evaluates the effectiveness of Hotline systems in two phases.³ Phase I, the subject of this report, uses existing data to compare pre- and post-Hotline caseload statistics in select programs. In addition, it summarizes the information obtained in interviews with Hotline managers and Executive Directors of programs with Hotlines concerning varieties of Hotline staffing and a number of other issues relating to Hotline design and implementation, as well as the perceived strengths and weaknesses of Hotlines.

Phase II will evaluate the effectiveness of Hotlines in obtaining favorable outcomes for clients and address other questions relating to Hotline effectiveness. This analysis will be based primarily on new data derived from follow-up interviews with a sample of people who sought and obtained assistance from legal Hotlines.

II. Research Methodology

Phase I began with a series of telephone interviews with Hotline managers and Executive Directors. The primary purpose of these interviews was to identify those programs with comparable quantitative data for two years prior to and following the introduction of the Hotline. We also interviewed the managers and directors about their perceptions of the effectiveness of Hotlines in improving services to clients, and about the particular strengths and weaknesses of Hotlines. The interviews also generated a significant body of information about varieties of Hotline staffing and a number of other issues relating to

³ The Hotline Outcome Assessment Study is funded through the Project for the Future of Equal Justice with grants from the Open Society Institute. The Project for the Future of Equal Justice is a joint initiative of the National Legal Aid and Defender Association and the Center for Law and Social Policy, funded by the Ford Foundation and the Open Society Institute of the Soros Foundation.

Hotline design and implementation. Finally, we gathered information about client satisfaction surveys and other efforts to gauge Hotline effectiveness conducted by Hotline programs.

The telephone interviews with Hotline managers and Executive Directors were guided by a semi-structured interview protocol designed by Center researchers. It was developed following a review of the literature related to Hotline operations and LSC case reporting requirements. It was reviewed by the study's Advisory Committee and revised with their input. It was further revised following a day-long visit to one site and the completion of the first five telephone interviews. On average, each interview took approximately 75 minutes. A total of 44 interviews were conducted (see Appendix A). A copy of the interview protocol appears in Appendix B. Data from all of these interviews were used in the qualitative portion of this report.⁴

Only 16 of the 44 programs that were interviewed were ultimately selected for inclusion in the quantitative analysis. The selected programs were those that met the following criteria:

⁴ The list of Hotlines to be interviewed was supplied by the study's Advisory Committee. Initially, it consisted of all the Hotlines listed in the National Hotline Directory as of March 1999 that receive LSC funding. (As discussed below, the Advisory Committee decided to focus on LSC-funded Hotlines because of the availability of CSR data for all such programs.) Several programs were removed from the list because members of the Advisory Committee had first-hand knowledge that the system did not comply with the definition of a Hotline used in the study. In addition, four senior Hotlines not funded by LSC were interviewed to determine whether valid pre-Hotline and post-Hotline data might be available for them. Although this proved not to be the case, and these Hotlines were not included in the quantitative section of the study, the information obtained in the interviews was considered in the qualitative sections of the study. The information obtained from LSC-funded Hotlines that were excluded from the quantitative analysis for one reason or another was also included in the qualitative sections.

(1) the program had two years of pre- and two years of post-Hotline data;⁵ (2) no major program changes, other than the introduction of the Hotline, occurred during this time period (such as major changes in service area); and (3) the Hotline was not restricted to single issues or service delivery to seniors.

⁵ Only complete years were included in the analysis. That is, the last full year without Hotline services was the second pre-Hotline year and the first full year of Hotline services after the program was completely implemented was the first post-Hotline year. The implementation period was established in the interview for which post-Hotline data was extracted. In 13 of the 16 programs, the implementation period was within a single year. Three programs took two years to complete the transition.

One significant category of LSC-funded Hotlines that was excluded from the quantitative analysis was the group operated by new programs created in response to the imposition of new restrictions on the activities of LSC-funded programs in 1996, when a number of previously LSC-funded programs decided that they would no longer apply for LSC funds. This group includes the LSC-funded Hotlines in Connecticut, Massachusetts, Vermont, New Hampshire, and Washington State. These programs had to be excluded from the quantitative analysis because: 1) there are no pre-Hotline data available for comparison; and 2) these programs typically do not provide extended services.⁶

The programs selected for inclusion in the quantitative analysis are listed in the following table. The table also identifies the pre- and post-Hotline years considered in the analysis and the basic structure of the Hotline.

Table 1: Characteristics of 16 Programs with Hotlines				
Program	Pre-Hotline Years	Post-Hotline Years	Staffing	Hotline versus Warm-line (call-back system)
Northwest Florida Legal Services, FLORIDA	1994-1995	1997-1998	Secretary and staff attorneys	call-back system
Western Nebraska Services, NEBRASKA	1994-1995	1997-1998	Receptionist and paralegal and attorney of the day	call-back system
Legal Aid Society of Orange County, CALIFORNIA	1994-1995	1997-1998	Paralegals, law clerks, and work-study law students directly under a supervising attorney	true Hotline
Southern Arizona Legal Aid, Inc. ARIZONA	1991-1992	1994-1998	Staff attorneys	true Hotline
Central Virginia Legal Aid Society, VIRGINIA	1989-1990	1993-1998	Pro bono attorneys	call-back system
DNA-People's Legal	1993-1994	1996 & 1998	Staff attorney	mix of true

⁶ The only way to analyze pre-Hotline and post-Hotline levels of brief services and extended services in these circumstances would be to include the pre-Hotline CSR data and post-Hotline data on extended services from the previously LSC-funded programs that serve these service areas. The Study's Advisory Committee decided that because these data would be coming from two or more programs, there would not be sufficient consistency to permit meaningful comparison.

Table 1: Characteristics of 16 Programs with Hotlines				
Services, ARIZONA^a				Hotline and call-back system
Neighborhood Legal Services of Buffalo, NEW YORK^b	1989	1992-1998	Receptionists and paralegals	call-back system
Coastal Bend Legal Services, TEXAS	1994-1995	1997-1998	Staff attorneys and paralegals	true Hotline
Program	Pre-Hotline Years	Post-Hotline Years	Staffing	Hotline versus Warm-line (call-back system)
Southern Tier Legal Services, NEW YORK	1994-1995	1996-1998	Staff attorneys and paralegals	2 offices with Hotlines: (1) days and times for particular issues – ask people to call back at appropriate time (2) mix of true Hotline and call back system
Legal Services Program for Pasadena and San Gabriel-Pomona Valley, CALIFORNIA	1994-1995	1997-1998	Receptionist and paralegals	often use call-backs system
Legal Aid of Central Michigan, MICHIGAN	1993-1994	1997-1998	Law students and a supervising attorney	true Hotline
Knoxville Legal Aid Society, TENNESSEE	1990-1991	1993-1998	Receptionist and Paralegals	mix of true Hotline and call-back system
Legal Aid Society of Hawaii, HAWAII	1994-1995	1997-1998	Receptionist, staff attorneys and paralegal, contact attorneys and contract paralegals, law students, Americorps volunteers	true Hotline
Legal Services of Northern, VIRGINIA	1992-1993	1995-1998	Receptionist; paralegals do intake and referrals; pro bono attorney does call backs for advice and information	call-back system
Capital Area Legal Services Corporation, LOUISIANA	1994-1995	1997-1998	Staff attorney	mix of true Hotline and call-back system

Table 1: Characteristics of 16 Programs with Hotlines

Legal Aid Society of Roanoke Valley, VIRGINIA	1992-1993	1995-1998	Pro bono attorneys	call-back system
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^a DNA suspended its Hotline for part of 1997, but it was fully operational for all of 1998.

^b Only one year of prior data were available for Buffalo.

To measure the changes in pre- and post-Hotline caseloads, we used three categories of CSR cases: total, brief services, and extended services. Our brief services category combined CSR categories A-C. Our extended services category included CSR categories D-F.⁷

Limitations of LSC data

The quantitative analysis of case volumes and levels of brief and extended services presented in this study is based entirely on the case service reports (CSRs) submitted by programs to LSC on an annual basis. A copy of the CSR form appears in Appendix D. Initially, the Study's Advisory Committee hoped that CSR data could be supplemented by additional caseload statistics maintained by the programs. However, it was determined in the interviews this would not be feasible, since little, if any, such data exist in a form that would be readily accessible and meaningful for analysis. The LSC data are the only type of information that is uniform from program to program over time, easy to obtain, and inexpensive. For most programs, LSC data are the only type of information available at all.

There are significant limitations to the LSC data. The CSR statistics reflect only the number of cases and the reason for closing the case. They do not reflect the significance of the case or the amount of time or resources it consumed. In the category of cases closed after a court decision, for example, there is no distinction between a routine eviction, handled in a few hours, and a significant case affecting large numbers of low-income people and requiring thousands of hours of work. Nor do the CSR data reflect other significant

⁷ Categories D (Insufficient Merit), E (Client Withdrew), and J (Change in Eligibility) were included in our Extended Services category because all three represent situations in which extended services were provided before the case was closed. Category K (Other), as defined by LSC, represents cases in which more than brief services were provided.

services that a program provides, such as *pro se* clinics, classes, and other outreach efforts. As one interviewee commented, “If I go and talk to 35 people at a senior site, no LSC case is counted.” The aggregate number of cases in the extended services categories thus does not necessarily provide an accurate measure of the level of LSC-funded services that the program is providing to individual clients and to the client community as a whole. Another limitation is that LSC data do not reflect total program activity or segregate Hotline activity. Data are for all program cases wholly or partly funded with LSC funds; it is impossible to distinguish between Hotline and non-Hotline cases. Moreover, LSC does not count cases that are funded by non-LSC sources or callers who are ineligible due to financial or conflict considerations, but who often receive a referral. According to several interviewees, there has been a marked increase in ineligible callers with the introduction of the Hotline due to the increased accessibility offered by a telephone intake system.⁸

Another limitation of the CSR data is that the definitions of the different categories have not always been interpreted consistently from program to program and by the same program from year to year. LSC has changed its reporting requirements significantly over time, which has affected the comparability of caseload data. Many Hotline managers thought these changes had been severe enough to make pre- and post comparisons of caseload statistics unreliable.

Yet another limitation of LSC data is that the figures on case handlers do not distinguish between full-time and part-time workers, making it impossible to analyze changes in cases per handler in pre- and post-Hotline years.

Limitations of the Group Studied

⁸ Interviewees indicate that most of their ineligible callers are ineligible because they are over-income. One interviewee indicated: “Due to welfare reforms, many people are off welfare and in jobs and fall just above the income limit. There is a tremendous unmet need. Callers are rejected who are making \$16,000 a year. In the last 6 weeks, we rejected 334 callers. Over-income is becoming more and more of an issue.”

The 16 Hotlines included in the quantitative analysis are not necessarily representative of legal services Hotlines as a whole, or even LSC-funded Hotlines. As noted above, a number of the largest and best known Hotlines had to be excluded from the analysis because of the lack of consistent pre- and post-Hotline data.

In addition, for nine of the programs studied, the analysis is limited by the short time period for which data is available. Ideally, a pre- and post-analysis should cover many more programs and time points. More to the point, for Hotlines that have only two years of post-implementation data, we may well be capturing only the early effects of the Hotline and missing the efficiencies to be realized over a longer period of time. The seven Hotlines for which more than two years of post-implementation data are available represent a small fraction of the numerous programs with Hotlines currently funded by LSC.

III. Overall Effectiveness of Hotlines

We analyzed the overall effectiveness of Hotlines from three different perspectives: (1) quantitative analysis of pre-and post-Hotline CSR data; (2) the perceptions of Hotline managers and directors of programs using Hotlines, as reported in interviews; and (3) review of client satisfaction surveys.

A. Analysis of LSC Data

Short-term Changes in Caseload, Brief and Extended Services

Hotline proponents contend that telephone intake, advice, and referral systems are so much more efficient than traditional intake procedures that programs are able to provide brief services to a greater number of clients without reducing their commitment to extended services. Skeptics maintain that the expansion of brief services detracts from a program's ability to provide extended services.

To examine these competing points of view, we analyzed case closings reported to LSC for 16 programs that met the requirements for inclusion in the quantitative analysis. To reduce the impact of extreme fluctuations, we averaged case statistics at each program for two years prior to and following the implementation of the Hotline. To gain a perspective on

whether change patterns hold up over time, we conducted an identical analysis for seven programs that had three or more years of Hotline experience. Table 2 presents a comparison of case volumes for two years prior to and two years following implementation of the Hotline for all sixteen programs. After Hotlines were introduced, the average total number of cases handled at the programs increased significantly, rising from 5,458 to 6,763. Similarly, the number of brief services cases also increased significantly, with the cross-site average going from 4,278 to 5,688. While there was an average decrease in the number of extended service cases closed in the two years following implementation of the Hotline, the drop was modest. Across the 16 programs, the average number of extended cases went from 1,175 to 1,076, a difference that was not statistically significant.

Table 2: Numbers of Total, Brief & Extended Cases for 16 Programs Prior to and Following Hotline Start-up						
	PRIOR ^a			POST ^b		
Program	Total	Brief	Extended	Total	Brief	Extended
NW Florida	2,697	2,031	666	3,436	3,109	327
W Nebraska	3,490	2,619	871	4,406	3,796	610
Orange County	13,565	10,790	2,775	20,265	18,143	2,122
S Arizona	5,649	3,948	1,701	7,610	5,997	1,613
Central Virginia	2,952	2,146	806	6,135	4,982	1,153
DNA	8,136	5,982	2,154	7,118	5,655	1,463
Buffalo ^c	5,971	4,110	1,861	9,469	7,057	2,412
Coastal Bend	7,366	5,924	1,442	6,680	5,667	1,013
Southern Tier	1,666	1,171	495	1,614	1,205	409
Pomona	5,629	5,131	498	7,780	7,367	413
Central Michigan	4,615	3,919	696	4,937	4,365	572
Knoxville	4,491	3,473	1,018	3,246	2,612	634
Hawaii	9,075	8,232	843	12,787	11,975	812
Northern Virginia	4,168	3,218	950	5,062	3,922	1,140
Capital Area	5,340	3,683	1,657	6,280	4,102	2,178
Roanoke Valley	2,427	2,061	366	1,380	1,042	338
Cross-site Means	5,453	4,278	1,175	6,764*	5,688**	1,076

Table 2: Numbers of Total, Brief & Extended Cases for 16 Programs Prior to and Following Hotline Start-up

*Difference from prior to post is statistically significant at .03.

**Difference from prior to post is statistically significant at .02.....

^a Prior figures represent an average of cases closed from the last two full years prior to Hotline implementation.

^b Post figures represent an average of cases closed from two years following Hotline implementation.

^c Only one year of prior data were available for Buffalo.

A program-by-program analysis shows these factors playing out in a variety of ways. Following the introduction of Hotlines, total case closings increased for 11 of the 16 programs, while 12 experienced an increase in brief service cases. Four of the 16 programs showed an increase of more than 10 percent in extended services cases. In three programs, the level of extended services remained essentially the same (all three showed a slight decrease, but less than 10 percent). In the remaining nine programs, there was a substantial (more than 10 percent) decrease in the level of extended services (see Table 3).

Looking at these results from the perspective of Hotline proponents and skeptics, six of the programs (Southern Arizona, Central Virginia, Buffalo, Hawaii, Northern Virginia, Capital Area) were consistent with the model put forward by Hotline proponents, showing a significant increase in brief services without a significant decline in extended services. Another six of the programs (Northwest Florida, Western Nebraska, Orange County, DNA, Pomona Valley,⁹ Central Michigan) were consistent with the prediction of Hotline skeptics, showing a significant increase in the level of brief services along with a substantial decrease in extended services of more than 10 percent. The remaining four programs were not consistent with either model. In one (Knoxville), the level of both brief services and extended services fell more than 10 percent. In two (Coastal Bend and Southern Tier), brief services remained relatively constant (less than 10 percent change) while extended services fell more substantially.

Since many LSC-funded programs lost a great deal of funding in 1996, and since 1997-1998 were the post-Hotline years analyzed for the majority of the programs included in the

⁹ Pomona Valley showed a significant decrease in extended services in the first post-Hotline year, but in the second year, the level was within 10 percent of the pre-Hotline level.

study, we compared the percentage change in levels of brief and extended services to the percentage change in funding for the pre- and post-Hotline years to see if there was a relationship between funding and case change.

Table 3: Percentage Change ^a in Brief & Extended Cases and Budget for 16 Programs Prior to and Following Hotline Start-up			
Program	Percent Change in Brief Services	Percent Change in Extended Services	Percent Change in Total Budget
Northwest Florida	53%	-51%	-4%
Western Nebraska	45%	-30%	1%
Orange County	68%	-24%	-7%
Southern Arizona	52%	-5%	49%
Central Virginia	132%	43%	23%
DNA	-5%	-32%	14%
Buffalo ^b	72%	30%	44%
Coastal Bend	-4%	-30%	7%
Southern Tier	3%	-17%	12%
Pomona Valley	44%	-17%	-20%
Central Michigan	11%	-18%	20%
Knoxville	-25%	-38%	8%
Hawaii	45%	-4	13%
Northern Virginia	22%	20%	23%
Capital Area	11%	31%	-10%
Roanoke Valley	-49%	-8%	19%
^a Percentage changes are based on an average of 2 prior years and 2 post-Hotline years. ^b Only one year of prior data were available for Buffalo.			

Although there is a moderate positive relationship between budget change and changes in extended services ($r=.39$), the small number of cases in the study makes the analysis extremely tentative. Correlation coefficients are normally not calculated for sample sizes under thirty.

It may be more useful to compare the size of the program with changes in caseload. All six of the programs that showed an increase in brief services without a large decrease in extended services had pre- and post-Hotline budgets of over \$1 million per year. Of the six programs that showed an increase in brief services but a decrease in extended services, three had budgets of over \$1 million and three of under \$1 million. Three of the four programs that did not fit either model had budgets of less than \$1 million (see Table 4).

Table 4: Changes in Funding for 16 Programs Prior to and Following Implementation of the Hotline

Program	Pre-Hotline Total Funding ^a	Post-Hotline Total Funding ^b
Northwest Florida*	\$869,014	\$834,470
Western Nebraska*	\$704,202	\$710,545
Orange County	\$4,077,724	\$3,793,499
Southern Arizona ^c	\$2,127,642	\$3,175,764
Central Virginia*	\$899,452	\$1,109,005
DNA	\$2,976,230	\$3,398,408
Buffalo ^d	\$1,664,553	\$2,403,479
Coastal Bend	\$1,581,251	\$1,698,086
Southern Tier*	\$569,406	\$637,462
Pomona	\$2,020,264	\$1,608,187
Central Michigan*	\$810,548	\$972,202
Knoxville*	\$680,542	\$733,560
Hawaii	\$2,864,820	\$3,226,194
Northern Virginia	\$2,050,408	\$2,526,928
Capital Area	\$1,975,609	\$1,781,648
Roanoke Valley*	\$602,968	\$717,089
Cross-site Means	\$1,654,664.50	\$1,832,907.50*

*Difference from prior to post is statistically significant at .07.

^a Pre-Hotline funding represents an average of the last two full years prior to Hotline implementation.

^b Post-Hotline funding represents an average of two years following Hotline implementation.

^c Total funding for two years prior to Hotline start-up (1991) was not available for Southern Arizona, so the prior budget figure is an average of total funding one year prior to Hotline start-up (1992) and three years prior to Hotline start-up (1990).

^d Only one year of prior data were available for Buffalo.

We conducted follow-up interviews with the nine programs that showed a marked decrease in extended services to see what explanations the manager or director could offer for these results. None blamed the dedication of resources to the Hotline for the reduction in extended services. They cited a number of different factors, such as major changes in staffing, changes in how cases were counted for CSR purposes, and changes in the circumstances of the client community.¹⁰

Longer-Term Patterns

The process of implementing a Hotline places great demands on programs. Money and staff time must be devoted to purchasing computers and a phone system, developing Hotline materials and databases, and learning new telephone and computer technologies. If programs dedicate a disproportionate share of their resources to the Hotline during its start-up years, there may be some temporary reduction in the capacity to handle extended services.

We isolated the seven of the 16 programs that have Hotlines that have been in operation long enough that there are more than two years of post-Hotline case data. Caseload statistics for total, brief, and extended services for these seven programs are presented in Table 5. We compare average caseloads in the two years prior to the Hotline with averages for the two most recent years – 1997 and 1998.

In contrast to the significant increases in total and brief cases evidenced by programs in Table 2, the cross-site averages for older programs with more Hotline experience in Table 5 show non-significant increases in total and brief service cases. In addition, while there was still a non-significant drop in extended cases when pre-Hotline years were compared with

¹⁰ For example, the director of Northwest Florida Legal Services attributed the results primarily to staffing changes. Total case handlers went from 13 in 1993 to 9 in the first full year of the Hotline's operation. In addition, support staff were lost due to the 1996 LSC funding cuts. Finally, Northwest Florida experienced some case volume decline as a result of the Legal Service Corporation's simultaneous ban on prisoner cases.

1997 and 1998, the average decline across the seven programs was only by 22 cases (1,029 to 1,007). Clearly, changes in caseloads for both brief and extended services narrow over time.

Table 5: Numbers of Total, Brief and Extended Cases for Seven Programs with Three or More Years of Hotline Operation

	PRIOR ^a			MOST RECENT ^b		
Program	Total	Brief	Extended	Total	Brief	Extended
Southern Tier	1,666	1,171	495	1,490	1,235	255
Southern Arizona	5,650	3,948	1,701	7,645	5,961	1,684
Central Virginia	2,952	2,146	806	3,589	2,857	732
Buffalo ^c	5,971	4,110	1,861	8,460	6,305	2,155
Northern Virginia	4,169	3,218	950	4,549	3,479	1,070
Knoxville	4,491	3,473	1,018	3,315	2,453	862
Roanoke Valley	2,428	2,061	366	1,286	999	287
Cross-site Means	3,904	2,876	1,029	4,334	3,328	1,007

^a Prior figures represent an average of cases closed from the last two full years prior to Hotline implementation.

^b Most recent figures represent an average of cases closed from the two most recent years since Hotline implementation.

^c Only one year of prior data were available for Buffalo.

Despite the overall lack of significant change, some programs continued to show more substantial changes than others. Three of the programs (Southern Arizona, Central Virginia, and Buffalo) showed a large increase in brief services (30% - 50%) with an increased or relatively constant level of extended services. Northern Virginia showed an increase of just under 10 percent in brief services and of just over 10 percent in extended services. Two programs (Knoxville and Roanoke Valley) showed pronounced decreases in both brief and extended services, while Southern Tier had little change in brief services, but a marked drop in extended services.

Again, program size may help to explain changes in levels of service. The three programs that showed a marked decrease in extended services all had budgets of under \$1 million, while the other four all had budgets of over \$1 million.

Table 6: Percentage Change ^a in Brief and Extended Cases and Budget for Seven Programs with Three or More Years of Hotline Operation

Program	Percent Change in Brief Services	Percent Change in Extended Services	Percent Change in Total Budget
Southern Tier	5%	-48%	5%
Southern Arizona	51%	-1%	15%
Central Virginia	33%	-9%	43%
Buffalo ^b	53%	16%	51%
Northern Virginia	8%	13%	25%
Knoxville	-29%	-15%	41%
Roanoke Valley	52%	-22%	24%

^a Percentage changes are based on an average of 2 prior years and 2 most recent Hotline years.

^b Only one year of prior data were available for Buffalo.

Discussion

The analysis of the data does not provide a definitive resolution of the differing views of Hotline supporters and skeptics concerning the effect of the Hotline on levels of brief services and extended services. Cross-site averages of the sixteen programs show a significant increase in the overall level of cases and in the level of brief services in the first two years after adoption of the Hotline, without a significant reduction in the level of extended services. However, cross-site averages of the seven programs with a longer Hotline history show no changes in total, brief, or extended services that rise to the level of statistical significance.

These overall results may mask major differences in the patterns experienced by the different programs studied. Program-by-program analysis shows that six of sixteen programs studied were able to achieve large increases in brief services without marked reductions in extended services in the first two post-Hotline years, and that three of seven programs maintained that pattern over a longer period, although increases in brief services were not statistically significant for programs with three or more years of post-Hotline history. Program size may be an important factor in obtaining these successful results, with programs with budgets over \$1 million displaying the most robust caseload patterns. For

programs that are considering adopting the Hotline model, this analysis suggests that it is possible to achieve the successes claimed by Hotline supporters, but that such success is by no means guaranteed. Smaller programs are less likely to achieve increases in brief services without a reduction in extended services.

B. Perceptions of Managers and Directors

In our 44 interviews with Hotline managers and program directors, we asked the interviewees about their perceptions and the perceptions of other staff members of the effectiveness of Hotlines in improving services to clients, and about the particular strengths and weaknesses of Hotlines.

On the question of overall effectiveness, the perceptions of the interviewees are overwhelmingly positive. All of the interviewees perceive that their Hotline has expanded capacity, productivity, and client accessibility. None reported that they regret implementing the Hotline.

We asked the interviewees about the pros and cons of Hotlines. Their responses are summarized in Table 7 and discussed below.

Table 7: Perceived Strengths and Weaknesses of Legal Hotlines	
Strengths	Weaknesses
Increases accessibility <ul style="list-style-type: none"> · <i>Reaches hard-to-serve and employed populations</i> · <i>Reduces client no-shows</i> 	Reduces accessibility for people without telephones if walk-ins are limited
Increases capacity and productivity <ul style="list-style-type: none"> · <i>Ability to provide service to larger volumes</i> 	Requires time, money and staff that are not available for extended services
Increases efficiency <ul style="list-style-type: none"> · <i>Eliminates lengthy application process for advice and brief service</i> · <i>Replaces lengthy in-person interview with brief telephone format</i> · <i>Streamlines referral process</i> 	Generates a high call volume that may overwhelm the agency, lead to staff burn out, and generate more conflicts
Improves case tracking	Increases the possibility of communication

Table 7: Perceived Strengths and Weaknesses of Legal Hotlines

<ul style="list-style-type: none">· <i>Generates consistent information on cases</i>· <i>Leads to better identification of client needs and case trends</i>	<ul style="list-style-type: none">· <i>Significant issues may be missed</i>· <i>Difficulty reviewing documents</i>· <i>Literacy problems or lack of comprehension may be missed</i>
Improves consistency of case treatment	Increases the possibility of giving brief services to cases needing extended care
Encourages early intervention and prevention of legal problems	

Strengths of Hotlines

Managers and Executive Directors of programs with Hotlines cite more strengths than weaknesses to the approach. These include increased client accessibility; increased capacity, productivity, and efficiency; improved case tracking; improved consistency of case treatment; and increased opportunity for early intervention and prevention.

Increased Accessibility

The benefit most frequently cited by managers is that Hotlines make it easier and faster for clients to access legal assistance. Most people find it easier to make a telephone call than to travel to an office. Hotlines especially facilitate access for employed people, rural residents, people with transportation problems, and people with child care issues. Hotlines save clients from in-office wait times, time missed from work, and travel expenses. As one interviewee explained:

There are two very apparent effects of the Hotline: One, before we had a waiting list for service. It took 2 months to get in. There is no waiting list now. They get in within a week. Two, our no-show problem has gone away. We have no no-shows now. Before, they decided what to do about their legal problems on their own, I assume. They didn't want to wait 2 months. The no-show problem has gone away because we are seeing them quicker now.

Another interviewee said:

Pre-Hotline, we had a 50% no show rate and they used to be scheduled weeks out. Now we see people within a week. Now people who would've dropped out are getting advice and hopefully following through with it.

Increased Capacity, Productivity, and Efficiency

Interviewees overwhelmingly perceived that the Hotline enabled their program to help more people with the same or fewer resources.¹¹ For example, one interviewee explained:

Before the Hotline, we did intake 3 days a week and could only handle 20 intakes or so a week. With the Hotline we handle 90-100 clients a day.

Hotlines are also perceived to be more efficient ways to give legal advice and eliminate what used to be a lengthy and involved application process. As one interviewee commented:

In the old days, the eligibility worker would open a file manually. The next week the law student would interview the client. Then the attorney would review the file or re-interview the client and decide whether to take the case or just do advice and/or a referral. It could take 1½ weeks to get brief advice or be told we can't take your case.

In addition to saving time for the client, Hotlines are perceived to save time for the program. For example, intake interviews take less time over the phone than in-person. Some argue that Hotlines free up time for staff to do extended service work. (As reported in Section III, however, the empirical data concerning the effect of Hotlines on extended services are mixed.)

Hotlines are also perceived to streamline the referral process. Managers report that well-run Hotlines, and especially statewide, multi-program, intake Hotlines, have an excellent overview of the array of possible sources of assistance. They can efficiently match a caller with an appropriate provider during a brief phone call, saving the caller from having to come in to the office to receive a referral.

¹¹ However, as noted above, the data did not always support this conclusion.

However, the increased access and demand for services that Hotlines bring may be problematic for programs with very small staffs. One Executive Director from a small program answered the question “Do you think that the Hotline has affected your productivity/expanded your capacity?” by saying:

If we had the attorneys, yes. . . . We have such limited resources. We need to up our PAI too. We are trying to work with the bar to get more PAI help. So, theoretically, yes. In reality, no.

Improved Case Tracking

One by-product of the development of Hotlines has been the development of computer software programs to generate consistent information on callers and cases and to facilitate conflict checks. If a client calls back about the same issue, the Hotline advocate can easily pull up that person’s file on the computer and immediately see what advice an advocate previously provided. Although such programs can be used to support walk-in intake as well as telephone services, managers associated this benefit with Hotlines.

Managers also reported that Hotlines facilitate the identification of client needs and case trends. One interviewee stated that the “Hotline is one of most reliable needs assessment tools available.” Also, Hotlines with well-maintained referral information can spot relevant trends, including service duplication and unmet needs. One interviewee states, “With the Hotline, by broadening the range of areas we deal with, we have realized some major problems in the larger justice system, which we are now trying to change.”

Early Intervention and Prevention

Many interviewees feel that Hotlines encourage early intervention and prevention of legal problems. People often call simply to get information or to find out about their legal rights. In contrast, people usually wait until they have a significant legal problem before they to come in to a legal aid office. As one interviewee put it:

Our emphasis now is preventive. People call a Hotline when they are beginning to have a problem. We encourage this through our community education program and by working with other providers. The beauty of it is to get advice *before* they get into a jam. There is a preventive focus.

Hotlines may also benefit the legal service program by weeding out people who are not committed to or suited for a course of legal action. As one interviewee explained:

People want to know what their legal rights are. The Hotline provides this information. It helps weed out people who are not committed to pursuing a particular course of action. They decide they don't want to proceed once they get basic information on the law. This saves time for staff attorneys. It lessens their case load too. People get basic information about the law and then they can make a decision based on that information or advice regarding whether they want to proceed with a particular course of legal action. If these people come back for more extended services they are more prepared and more ready to take that course of action.

Even if there is no possible resolution to a caller's problem, many find that information about the problem in and of itself can be very useful. For example, in an eviction situation that can't be avoided, the Hotline advocate can explain what will happen and warn the caller to take items he or she will need out of the apartment (e.g., medications, records). Interviewees perceive that knowing one's legal rights and what is going to happen lowers a caller's anxiety and prevents further inconveniences.

All in all, managers and Executive Directors of programs with Hotlines are extremely positive about their experiences and agree that there are clear benefits to telephone intake, referral, and advice systems. Favorable comments from interviewees include the following:

- To me, it [implementation of the Hotline] is the single best decision that has been made in the 10 years I've been with legal assistance.
- It is the best of both worlds. We dispose of by phone what makes sense to. What doesn't make sense to, we don't.
- I don't see a downside to the Hotline. If we got a bunch more money, we'd still keep the Hotline. It is an integral part of our program.
- We were concerned for so long about how to say no to people. We need to be concerned about how to say yes to people. This is what you can do with telephone advice. The more you say yes to people the better reputation you get.
- Before the Hotline, people with simple questions were not getting through. We're much more responsive to the community now.

Challenges and Weaknesses of Hotlines

Despite their overall enthusiasm for Hotlines, interviewees admit there are some problems and limitations. Problems associated with Hotlines include reduced accessibility for people without telephones, high call volumes, an increased possibility of communication problems, and an increased possibility of giving brief services to cases needing extended care. Interviewees also acknowledged the possibility that Hotlines could divert resources away from extended services; however, most feel the benefits of increased accessibility offered by a Hotline outweigh the possible necessity of a moderate reduction in extended services. Others point out that a well-run program should be able to maintain, or even increase, its level of extended services with the addition of a Hotline.

Reduced Accessibility for People Without Telephones

Some Hotline programs continue to allow walk-in intake, while others discontinued it. If walk-in intake is limited or eliminated, this could reduce accessibility for people without access to a telephone. However, the majority of interviewees do not see a significant problem in moving to phone intake only, even for people without phones in their own homes. Most Hotlines have toll-free numbers, so calling from a phone booth is free. Indeed, some programs provide a phone in their lobby so walk-ins can still go through telephone intake.

High Call Volume

The increased access Hotlines provide can also create challenges for programs. Programs may experience high call volumes that are overwhelming, lead to staff burnout, and generate more conflicts. Indeed, a couple of interviewees say that their program was not prepared for the huge volume of calls that it received after the introduction of the Hotline. As one Executive Director explained:

The volume of cases can be overwhelming. The Hotline has increased demand in all areas. It can lead to burn-out.

Another Hotline manager suggests that high call volume may be due to a rise in impulse calls. These are people who would not bother to come into an office with a question, but

will call a Hotline. Programs manage the increased volume Hotlines can generate primarily through limiting the hours of the Hotline and/or implementing a call-back system.

Conflicts

As Hotlines make it possible for programs to handle larger volumes, the probability of conflicts rises. Hawaii's Hotline must turn away approximately 5 to 7 percent of callers because of conflicts with callers who have already received services. Hawaii reports that the incidence of conflicts is rising and that this is a growing problem for the agency. Hotlines may have to consider changing how conflicts have traditionally been defined and handled, at least for cases with brief advice and referrals.

Some interviewees raise concerns about the impact of conflicts on program case priorities. Because Hotline callers are served promptly, on a first-come, first-served basis, without screening for program priorities, there is an increased possibility that the program will be unable to provide services in a case within its priorities because it has provided Hotline services to another party in the case. Interviewees cite the provision of services to abusers rather than victims as the quintessential example of non-priority callers preempting priority callers. In the words of one staff attorney:

A batterer who calls first can conflict out a victim. So now [with the Hotline], non-priority cases can conflict out priority cases.

The manager of the Hotline in the program where this staff attorney works explained the Hotline's policy:

First come, first served. If we suspect it is a batterer, we will give him advice and referral. We don't represent him. We may say: "I can't get you a lawyer because you are not a victim of domestic violence." There is controversy about this. Are victims of domestic violence getting conflicted out? [But] to not represent men is Title VII discrimination. In general, cases that get more substantial services are cases of victims.

Another interviewee said that her program's statistics indicate that abusers do not often receive services instead of their abused partners. She says the perception of this occurring

is “worse than the reality.” But, she recognized it is a potential problem that programs should consider.

Increased Possibility of Communication Problems

Another challenge of Hotlines is the increased possibility of communication problems in telephone versus face-to-face exchanges. Interviewees point out that it is more likely that significant issues may be missed in a telephone intake as opposed to an in-person intake. In addition, one manager said:

Face-to-face is more formal and maybe the client will take the advice more seriously from a face-to-face meeting. I don’t have any hard evidence to support that. But it may be true.

Hotlines are more impersonal than face-to-face consultations.¹² And in general, advocates spend less time talking with applicants in telephone intake as compared to face-to-face intake. Advocates may feel more rushed doing telephone intake than in-person intake because of the pressure of having several callers on hold. Some worry that these conditions cause issues to be missed which the advocate should know about in order to give appropriate advice. An Executive Director of a program with a Hotline said:

We will just miss some cases because we didn’t take enough time with the client and they couldn’t articulate their problem. I’d estimate that 10 out of 100 callers have an important issue that is missed. Five of those call back and 5 are lost.

Several interviewees worry that Hotline workers miss visible cues of comprehension or confusion that are available with face-to-face communication. As one interviewee put it, “You can’t see the puzzled look on someone’s face over the phone.” Also, literacy issues may be more difficult to spot over a Hotline than in traditional intake.

¹² One interviewee sees the impersonal nature of Hotline work affecting the quality of services Hotline callers receive. He said: “For advocates working the Hotline, there is a tendency not to see the people, not to care, not to see the results. Hotline advocates won’t be as satisfied in their work as non-Hotline advocates.”

Finally, some interviewees mentioned the challenge of reviewing documents when brief services are provided over a Hotline. One staff attorney we interviewed on a site visit to a Hotline commented:

The info side [of Hotlines] is useful. [But] brief service is dangerous. Giving clients advice about documents that attorneys can't look at is a bad practice.

Hotlines advocates will give advice about very standard documents without seeing them, but for other documents, they will often ask the person to fax in the document, or they will simply ask the person to come in to the office.

Potential Diversion of Time, Money, and Staff from Extended Services

Interviewees report that a Hotline can potentially divert time, money, and staff away from extended services. Especially at the beginning, a substantial investment of time and resources is necessary. Starting a Hotline requires expenditures for computers, case management software, and advanced telephone systems, as well as funding and time to train staff to use these new technologies. Legal reference materials need to be developed and regularly updated to reflect changes in the law. A database of referral sources must be developed and kept up to date. Many programs also create fact sheets or pamphlets with general legal information on various topics. Once the Hotline is in place, it must be adequately staffed and maintained. However, these ongoing operating expenses may be offset in part or entirely by reductions in costs associated with the intake system previously in place.

Particularly for small programs, the diversion of staff and resources to the Hotline can hinder the program's ability to maintain its prior level of extended services. According to the Executive Director of a very small program that experienced a steep decline in its level of extended service cases with the introduction of a Hotline, advance planning is needed. As this director expressed it:

In retrospect, better planning may have been to beef up PAI (private attorney involvement) first as an off-set [to the extended service staff hours lost to the Hotline].

A minority of interviewees worry that Hotlines represent a trend, as one put it, “of dispensing less and less to more and more.” A few characterize the problem as service work (which aids an individual and does not effect any broader social change) being emphasized to the detriment of impact work (which helps an individual as well as improving conditions for the wider community). One interviewee worries about ensuring that the right cases receive brief service and the right cases receive extended service.

Although a few interviewees are concerned about the Hotline detracting from the resources available for extended services, most feel that the benefits of higher access to many outweigh the costs of lower service to some. Still other interviewees see no incompatibility between Hotlines and extended services since Hotlines perform the same intake, brief advice, and referral services that programs have always provided, simply in a new and more efficient manner. A few interviewees feel that the Hotline has streamlined the intake process so that staff has time to do even more extended service work.

In a climate of diminished resources, telephone intake, advice, and referral systems are perceived to be more efficient ways to serve clients. But programs do need to balance their brief and extended components. This may be particularly challenging for small programs with limited staff and budgets.

C. Client Satisfaction Surveys

About half of the programs interviewed have collected some form of client satisfaction data. However, the data often do not distinguish Hotline clients from other clients. In addition, most of the user satisfaction surveys have relatively low response rates. For example, most programs gather such information through mail surveys and have response rates in the range of 3 to 20 percent. Seniors may be more apt to respond than younger callers. Indeed, senior Hotlines report response rates closer to 20 percent while programs serving younger low-income populations tend to get response rates of 10 percent or less. In addition, programs are rightly concerned about contacting victims of domestic violence, and surveys also tend to miss callers with housing issues because they typically relocate after contacting legal services.

A couple of programs report almost no response to their user satisfaction surveys. One manager commented:

It is very difficult to get that information. We tried and got very little response. If it is not still a problem, people don't want to deal with it.

One program attempted a mail survey, but received so few responses that it decided to rely instead on grievances filed as its measure of satisfaction. The Executive Director reports clients rarely file grievances, with one filed every three to five years. This interviewee suggested clients may be too easily satisfied:

[C]lients only have so much expectation when they come to our door and Hotlines have played a role in lowering people's expectations of what they can hope to get at legal services.

A paralegal who runs a Hotline also indicated that clients are easily pleased:

They are satisfied if you tell them something to help them. Often they just have a question and before calling the Hotline they got the run-around.

Survey results indicate that the majority of callers are pleased with the service they receive. Programs report a client approval rate ranging from 80 to 98 percent. The most common positive comment clients make, according to one Hotline manager, is that they were "given legal assistance in an efficient, convenient manner and were treated with respect." The following quote from a LARC survey is typical:

Your legal advice was just what I needed. Your staff suggested non-confrontational mannerisms and tone of voice – both of which made all the difference when I talked with my landlord. It "set the stage" for what became a dialogue with solutions rather than an argument and a series of accusations. I really am very grateful! Thank you!

However, not everyone perceived clients to be uniformly satisfied. One manager argued: [S]ome clients want and need miracles. They are never going to be satisfied because of the conditions of their lives. These people have huge complex life problems. No satisfaction is available.

Another stated, "Generally, if they win they are happy. If they don't, they're not happy."

However, other interviewees argued that clients do distinguish between the quality of the service they receive and their personal disappointments with their situation. A sample of client comments from several programs' surveys indicates this to be the case. These comments indicate that clients: (1) appreciate that the Hotline helped them understand the law and their rights, regardless of whether they followed the advice or experienced a positive outcome; and (2) express more satisfaction than dissatisfaction with Hotline services. As one Hotline manager put it:

A lot of people are happy with the service received even though the outcome is not what they wanted. This is a measure of empowerment which is one of the goals of our program.

When they complain, applicants tend to focus on being ineligible for service rather than the content of the service they received. One manager stated, "The only complaints we get are from people who are ineligible and don't like that fact." Other interviewees confirmed they hear a fair amount of complaints about income requirements. For example, as one client wrote:

I am appalled and amazed at the completely unrealistic financial restrictions and criteria necessary to qualify for legal assistance. The guidelines completely exclude almost any hardworking family making anything over minimum wage. The current guidelines make it almost impossible to receive free or limited-fee based legal services. Thanks for nothing.

Because of the low response rate and the limitations of the information they provide, client satisfaction surveys appear to be of limited value in assessing the effectiveness of Hotlines as a method of providing legal services.

A handful of programs have attempted to gather information about the actual outcomes of Hotline services for clients. To date, however, only incidental information has been obtained. Many interviewees note that it is difficult to measure outcomes for Hotline callers. For example, receiving information can, in and of itself, be a positive outcome, distinct from the eventual factual outcome of the case.

Information is of real value. Providing information so that people will understand what will happen to them, so they can make more informed choices, is a very important thing that we do.

Moreover, outcomes are not necessarily related to the quality of service the Hotline provides. As one interviewee noted, “Courts treat *pro se* litigants very differently depending on where you are in the country and depending on what court you are in.” Nonetheless, despite the difficulties associated with measuring outcomes, this is an area that many interviewees feel deserves future attention. One interviewee said:

I know the staff gives magnificent advice. What we don’t know is if there are barriers that prevent clients from using that *pro se* advice (1) within themselves, (2) due to judges who won’t let them speak their piece, or (3) due to court clerks who won’t accept hand-written filings.

IV. Issues Relating to Hotline Staffing, Implementation, and Operation

In our interviews, we also questioned the 44 Hotline Managers and program directors about a broad range of issues concerning Hotline staffing, implementation, and operation. The interviews reveal that Hotlines employ a variety of different models, which we summarize below. Managers and program directors generally report satisfaction with the particular choices their programs have made.

A. Staffing

The interviews indicate that Hotlines can be staffed in a number of different ways. Programs are equally divided among those staffing their Hotlines with attorneys, paralegals, a combination of attorneys and paralegals, and some other staffing configuration. Other less common staffing arrangements involve *pro bono* attorneys and law students. Screeners, intake workers, or receptionists may be utilized with any of these staffing arrangements to screen and gather basic information from callers before they speak with a legal advocate.

There is no consensus about the best staffing arrangement; most programs are partial to their own system. Certainly, all types of staff present their own challenges and opportunities (for example, see Tables 8 and 9).

The following table summarizes the advantages and disadvantages of various staffing models as described by Hotline managers in the interviews.

Table 8: Advantages and Disadvantages in Hotline Staffing				
	Staff Attorneys	Pro Bono Attorneys	Paralegals	Law Students
Expertise	High	Medium	High	Low
Supervision needed	Low	Medium	Low	High
Training needed	Low	High	Low	High
Cost	High	Low	Medium	Low
Stability	High	Low	High	Low
Ease of Scheduling	Easy	Hard	Easy	Hard
Legal Advice	Unrestricted	Unrestricted	Restricted	Restricted
Other Issues	Consistent case service – can go to court	Difficult to find volunteers	Good client rapport	May create a pool of future legal aid attorneys

Attorneys: Staffing Hotlines with attorneys puts the experts as close to the client as possible, and clients appreciate speaking with an attorney immediately. Using attorneys also requires less training and supervision, and places no restrictions on the types of services that can be provided. Of course, the major drawback is that attorneys are expensive, especially if attorneys rather than screeners are responsible for the clerical aspects of intake.

Paralegals: Paralegals are less expensive than attorneys. Although they may require more supervision than attorneys, many experienced paralegals are extremely knowledgeable. As one interviewee put it, “Our paralegals are amazing. Their collective legal experience is one million years.” By using more experienced paralegals, programs contain the amount of time and energy they devote to supervision.

Students: Some programs find law students to be a cost-effective way to staff a Hotline, while perhaps simultaneously encouraging another generation of legal aid attorneys. As one interviewee explained:

We are advocates of using students. They are enthusiastic and energetic and you create a pool for future hires. We have 3 attorneys on staff now who worked as students on the Hotline. Also, our case count per handler is more than double the national average because of using students.

Conversely, students may have a higher turnover rate. Certainly they require more training and are more constrained in the types of services they may provide. As one interviewee commented:

We used law students in the past for face-to-face interviews. Working with students is challenging. They are too eager to give legal advice.

Pro Bono Attorneys: Finally, although a few Hotlines have had success using pro bono attorneys, many programs report difficulty finding pro bono attorneys willing to work on a Hotline. The biggest benefit of using pro bono attorneys is that they work for free or a reduced fee. Also, one interviewee commented that pro bono attorneys are:

...fresher and more concerned than staff attorneys would be on the Hotline. They are not burned out. They are not sick of getting the same questions all the time.

On the other hand, pro bono attorneys may not be knowledgeable about poverty-related issues and may require extensive training. More to the point, one interviewee wondered if this training is adequate:

Some volunteer attorneys may be giving advice in an area in which they are not an expert. Personally I'd feel more comfortable getting advice from one of our staff attorneys than from one of the pro bonos.

Scheduling pro bono attorneys also may be difficult and coverage problems may arise if volunteer attorneys have last minute court commitments during their Hotline shift.

Other staffing issues confronting Hotline programs include whether to use screeners, whether to have Hotline specialists, whether to have specialists in specific legal areas, and whether to use part-time staff.

The following table summarizes the advantages and disadvantages of other staffing options as described by Hotline managers in the interviews.

Table 9: Additional Staffing Options for Legal Hotlines				
	Use of Screeners	Use of Hotline Specialists	Use of Legal Specialists	Use of Part-Time Staff
Pros	More efficient use of higher cost staff	More efficient Greater consistency Better trend identification	Callers receive service from an expert in their problem area	Reduces burnout Better quality staff
Cons	Screener burnout More steps for clients	Bifurcation of staff Atrophy of legal skills more likely Burnout	Reduces efficiency Complex scheduling	Reduces efficiency Complex scheduling

Screeners: Calls may go directly to a legal advocate (attorney, paralegal, law student, pro bono attorney) or they first may go through a screener, intake worker, or receptionist. Screeners check for eligibility and collect basic client information and perhaps a brief description of the legal problem. Proponents of screeners contend that these workers can do the clerical aspects of intake at a much lower cost than having attorneys do the full intake process. As one interviewee put it, “You can be inefficient and have most expensive people doing intake or choose not to do it that way.”

On the other hand, attorneys who do the entire intake spend more time with the client, establishing more of a connection and increasing the likelihood of catching significant issues that the caller may not immediately mention in framing his or her problem. Also, some interviewees feel that sending callers directly to a legal advocate without the use of a screener is more user-friendly. As one interviewee explained:

Not using screeners moves their contact with an advocate to the front of their contact with the system. Clients interpret this as respectful.

Another drawback to the use of screeners is the problem of burn-out. Since the work screeners do is both demanding and tedious, interviewees report problems retaining screeners.

Hotline Specialists versus Rotation: Specialists are advocates who work only on the Hotline and do not take extended service cases. Some programs favor the use of specialists while others prefer to rotate all staff attorneys on and off the Hotline.

Interviewees make several points in favor of specialization. One Hotline manager explained, “You do better at what you specialize in.” Another said:

We have specialized Hotline staff. If you handle [extended] cases and do intake, intake suffers because of pressing case needs and time frames [of the extended service work].

This manager cited another benefit of Hotline specialization: “You see patterns and can be consistent if you only do intake.” Some managers feel that using specialists is more efficient for the program. Others believe that specialization allows people who are temperamentally suited for the Hotline and like “triage” work to be appropriately placed. An interviewee explained:

The pace of work on the Hotline is faster, there’s more pressure, you have to be able to analyze and think on your feet. Hotline staff are like emergency room doctors and regular staff are like family practitioners.

On the other hand, those who favor rotation and eschew specialization cite several considerations in support of their position. One is quality. They believe that attorneys who continue to take extended cases stay more up to date on the law and legal procedures and thus can offer higher quality advice to callers than attorneys who work only on a Hotline. Another argument for rotation is staff cohesion. Some managers believe that a rotation system prevents Hotline advocates from being marginalized within the program. However, even supporters of staff rotation admit that it makes scheduling more difficult and that there

are practical barriers to juggling Hotline shifts with representation duties such as court hearings. Finally, for some smaller programs, specialization is not an option; they must rotate their limited, regular program staff on and off the Hotline.

Legal Specialists versus Generalists: There is another debate about the pros and cons of substantive specialization among Hotline staff. The majority of Hotlines in the sample use staff who are generalists – advocates who can answer a wide range of questions. Callers are not directed to topical specialists based on the nature of their problem. For most programs, “using legal specialists is a manager’s nightmare,” said one Hotline Director.

However, some programs prefer to use specialists. For example, those utilizing pro bono attorneys to staff “warm-lines” (call-backs after the initial screening) find specialization advantageous because the pro bono attorneys need to be prepared to respond to questions in only one or two substantive areas of poverty law. A few Hotlines in our sample schedule particular days and times to handle callers with certain types of legal issues, such as screening calls on public benefits on Monday and Wednesday mornings, with call-backs at scheduled times.

Part-Time versus Full-Time Hotline Staff: Some Hotlines use full-time Hotline staff, while others favor part-time staffing arrangements. Part-time arrangements may lower burnout and allow programs to recruit more qualified people. An advocate of part-time staffing stated:

We have a strong bias toward part-time because this is an incredibly high stress job listening to people’s problems. We get better people by offering part-time jobs. Many of our very successful Hotline advocates are single mothers or mothers who want to work part-time.

One way Hotlines with full-time staff try to avoid burnout is to limit the Hotline hours. For example, the Northwest Justice Project’s Hotline, CLEAR (Coordinated Legal Education, Advice, and Referral), has full-time employees, but the Hotline only takes calls for three hours a day, from 9:30 a.m. to 12:30 p.m. In the afternoon, advocates make call-backs (for

about an hour), do brief services, write community education materials, stay up to date on the law, and do outreach to referral agencies.

B. Implementation and Operation

In addition to staffing, managers identified numerous other areas in which they face decisions regarding the provision of services. These issues are critical for new programs, but continuing programs may also need to revisit them from time to time. This section considers the issues of:

- Staff resistance
- Information management systems
- Geographic service area
- Special needs clients
- Issues to cover
- Brief services
- Answering systems
- Call-backs
- Quality control

Staff Resistance

Programs implementing a Hotline should be aware that some staff may be resistant to the idea. Most interviewees say there were start-up concerns among program staff about the reallocation of resources and shifts in staff responsibilities. As one Hotline manager said:

Originally there was a lot of resistance to the Hotline among staff. They didn't like the re-shuffling of the budget to fund the Hotline. There was staff resistance to change. There was a fear of losing relevancy and a fear that the Hotline would dictate what cases they got.

A few interviewees said there are long-term disaffections and staff divisions about the Hotline.

It is an us/them mentality – Hotline staff vs. other [staff]. Some attorneys . . . feel threatened. . . . Their fears are couched in terms of quality concerns. There has been a shift in power.

The resistance to Hotlines, however, may reflect more basic frustrations with the limited resources available for legal services. A Hotline manager from another program explained:

There is a fear that resources will go to Hotlines to the detriment of existing services. There is not enough funding for legal services as it is. It is a zero-sum game and some people think . . . that a Hotline inevitably detracts from other services.

The vast majority of interviewees say the entire staff eventually comes to support the Hotline. As one Hotline manager said:

[N]ow everyone likes it. The Hotline freed up staff time to do legal work and they are thrilled about it now.

Information Management Systems

Information management systems need to be developed in preparation for launching a Hotline. This is a significant initial expense, but one that most Hotline managers and directors believe pays off. The system must include a database of referral sources, and this important resource for Hotline advocates requires ongoing updating. Programs report that developing and maintaining this database requires a fair amount of time, especially as there are changes in client needs, program priorities, and services offered by key agencies.

Some programs have developed a Web site to supplement information provided over the Hotline. The Web site can serve as a resource for both clients and social service providers.

It may include all the informational pamphlets or fact sheets that the program mails to callers, as well as common court forms, model pleadings, and links to different courts and social service providers.

Geographic Service Area

The geographic service area will influence what the Hotline does in a variety of ways. Some directors of regional Hotlines express concern that statewide Hotlines may fail to provide callers with information on local laws and court practices. Some managers of statewide programs concede that localized information is important but believe that this can be provided with a comprehensive and up-to-date database. Other statewide managers

maintain that people tend to call about broad problems and issues that can be addressed at the state level. They note that statewide Hotlines can be more efficient and less expensive to operate than numerous regional ones. Staff of statewide Hotlines may also be better able to spot trends in needs and services.

The urban/rural nature of the service area is also relevant. Hotlines serve different purposes in urban and rural settings. In urban settings, they facilitate a program's ability to deal with high volumes of applicants. In rural areas, their primary benefit lies in mitigating problems arising from long distances between program offices and applicants' residences. Rural programs are more likely to provide as much service as possible over the phone, especially for clients who live a great distance from the nearest office or have transportation difficulties. For example, an interviewee who works for a program that serves rural areas said, "We can do a full administrative hearing by phone for a client." Urban programs are less likely to provide brief services over the Hotline.

The introduction of a Hotline can also have an impact on the geographical distribution of the clients served by the program. For example, Dr. James Meeker of the University of California at Irvine performed a geo-mapping study of clients for the Legal Aid Society of Orange County. The maps, which use census data and data collected from Hotline callers, show that the geographic base of clients widened dramatically with the introduction of the Hotline.

Special Needs Clients

Hotlines make legal services available to people who have difficulty coming in to an office. These include people with limited transportation resources, people with disabilities and elderly people who may have limited mobility, people who lack child care assistance, people who live in rural areas far from a legal service office, and employed people who would have to miss work to go to a legal service office. And, of course, calling a Hotline is quicker and easier even for people who would not have significant difficulty coming to an office.

On the other hand, Hotlines can be limited in their ability to provide services to certain groups. Many Hotlines have advocates who speak Spanish, and in some instances, other languages as well. However, in some programs, if a Hotline does not have an advocate available who speaks the language of the caller, the caller will not receive services. Some Hotlines use the AT&T language line interpreter service. They report that it is adequate, although time-consuming. One interviewee stressed that programs should not assume that there is not a need for a particular type of service just because the program does not experience a demand for that service. She noted that word-of-mouth will deter non-English speaking clients from calling if services are only available in English. However, the same word-of-mouth will produce calls once multilingual staff have been added. As she said:

We didn't used to have a Spanish-speaking advocate and we didn't get calls from Spanish-only speakers. Then we got two Spanish-speaking advocates and all of a sudden Spanish-speakers were calling.

Hotlines may be problematic for people with hearing impairments, but this is not necessarily the case. Many Hotlines have TTY capacities that can be used with deaf callers, although interviewees report receiving few calls from the deaf. Seniors with hearing difficulties may, in fact, hear better over the phone than in person if they have an amplifier attached to their home phone.

Several interviewees argue that Hotlines work well for senior citizens. As one Hotline manager put it, "They don't have to travel to get advice and they like it." Not all interviewees agree. In the words of another Executive Director:

In our experience, a Hotline is not particularly amenable to seniors. Seniors prefer more face-to-face, more hands-on assistance. They are more comfortable and have better outcomes with face-to-face contact. And feedback we get from the Council on Aging indicates that senior like face-to-face legal assistance. So we send staff attorneys out to senior centers.

Hotlines do not work well for people with mental disabilities or mental illnesses and people with learning, reading, or cognitive problems. In short, anyone who has difficulty clearly explaining his or her problem and/or understanding, remembering, and acting on advice will be less well served by a Hotline.

The following table summarizes the views expressed by managers concerning the types of callers and types of issues for which Hotlines are generally most useful and least useful.

Table 10: Types of Callers & Issues for Which Hotline is Most and Least Useful

	Type of Caller	Type of Issue
Most Useful	Elderly Rural residents Employed people People with limited transportation resources People with child care problems	Quick questions Basic information Explanation of legal rights Referrals Intake for extended service cases Consumer/employment/housing/family problems
Least Useful	People with mental disabilities/illnesses People with limited communication abilities (hearing impaired/non-English speaking) People with learning/reading/thinking problems	Document-heavy cases Complex cases

Issues to Cover

Interviewees report that Hotline services are better suited to some types of legal issues than others. They are most useful for providing basic information, explaining legal rights, dispensing referrals, and providing intake for extended service cases. As one interviewee explained:

It is good for people who receive something in the mail that scares the hell out of them and then we calm them down. For example, an eviction notice. We explain to them that the law in this state is that the landlord has to take them to court in order to evict them. It is good for assuaging immediate fears.

Another said, “It is good for people who just need to be headed in the right direction.” And another added that Hotlines benefit “people trying to find an answer before they make a decision.”

Interviewees generally agree that sensitive issues such as domestic violence can be handled over a Hotline. As one interviewee put it:

You wouldn't believe the things people call and talk to us about. It is not a problem to talk about domestic violence over the phone. Domestic violence is 40% of our family calls. We get some horrible family situations and people can talk to us about them [over the phone].

Another interviewee pointed out that it may be easier for a domestic violence victim to call a Hotline than to leave home for a few hours to go through in-person intake at a legal service office. But another thought otherwise:

It is better to see domestic violence cases in-house. There is a fear of being overheard for them with the phone.

An Executive Director agreed that domestic violence cases are better handled in person:

With domestic violence, it is especially difficult to get the story over the phone. You really need to establish a rapport with a domestic violence victim. It is very hard to do advice with them over the phone. They usually get seen in-person in the office.

Thus, programs may want to offer both Hotline and walk-in intake to domestic violence victims so that the victim can choose what is most comfortable.

Most interviewees agree that Hotlines work well for the substantive areas of consumer complaints, public benefits, employment, housing, and family law. However, a critical issue in deciding how well the Hotline can serve the case is the type of documentation involved. If a caller has a very common legal document, he or she can describe it to the Hotline advocate, who may be able to give advice without seeing the document. But generally, document-heavy cases can present problems for Hotlines. Some Hotlines have callers fax documents to the legal service office and report that some, but not all, clients will find a fax machine and send their documents. Other programs choose to have callers with documents needing review come in for an office appointment.

Brief Services

The majority of Hotlines provide some type of brief service beyond information and advice. Since brief services (such as third-party calls and document preparation) require more time than information and advice, Hotlines that provide brief services cannot handle as many

calls as Hotlines that offer information, advice, and referrals only. Managers point out that providing brief services may be more important for rural Hotlines than urban ones since rural callers tend to have more difficulty getting to a legal aid office for a brief service appointment.

Some managers feel Hotlines run most efficiently when they limit their services to advice, information, and referrals. For example, the Legal Aid Society of Orange County refers callers who require service beyond advice and counsel to its litigation unit. LASOC's Hotline staff never contact third parties or call clients back. This allows the Hotline to handle a large volume of calls.

Hotlines that experience a lower call volume are more able to provide services beyond advice and counsel. This permits extended service staff to devote most, if not all, of their time to case representation. However, as discussed above, document-heavy cases may be difficult to handle over a Hotline and may be better served by an in-office appointment.

Answering Systems

The interviews revealed that Hotlines use different types of answering systems, reflecting different attitudes on the part of program managers. Some Hotline directors feel it is less alienating for callers to reach a human being than an automated system. As one interviewee said:

We like a receptionist to answer the phone up front. It prevents people from getting frustrated about not reaching a person.

Other interviewees stressed the advantages of automated answering systems. They can handle higher volumes than a single receptionist and can dispense preliminary information and even sort callers into different queues. Hotlines with automated systems can provide information about income eligibility requirements while callers are on hold, so that ineligible callers do not wait unnecessarily or require staff time to explain the eligibility requirements. One program reports that adding an outgoing message to its phone system clarifying income requirements significantly lowered the number of calls advocates received that were ineligible due to income.

Because they handle more calls than a receptionist, automated call answering and distribution systems can lead to longer hold times for callers. Although client satisfaction surveys indicate some frustration with long hold times, this does not seem to be an overwhelming problem.¹³ Only a few programs have the technology to monitor the amount of time callers spend on hold. CLEAR in Washington State, for example, reports that their average hold time ranges from three to five minutes, to 30 minutes for family law cases on a day with few advocates available. Similarly, a client satisfaction survey conducted for the Legal Aid Society of Orange County¹⁴ found that hold times range from zero to 40 minutes, with the average falling at 5.6 minutes and the majority waiting three minutes or less.

Call-Backs

Hotlines may either operate as true Hotlines, in which callers speak with a legal advocate on their first call to the program, or as “warm-lines” (call-back systems), in which people call and leave information about their problem with an intake worker or receptionist or on voice mail, and then receive a call back from a legal advocate at a later time. Some Hotlines are a combination of a Hotline and a warm-line, with some callers getting through to an advocate immediately, while others receive a call-back if all advocates are busy.

Warm-lines are believed to offer greater flexibility of scheduling and lower burnout levels for advocates. Call back systems allow programs to schedule call backs with particular advocates who specialize in different substantive areas of the law, and generally provide advocates more control over their time.

¹³ A satisfaction study done by LARC in Boston shows that 60 percent of callers to their automated answering system did not have trouble getting through. More to the point, 71 percent of callers who had difficulty getting through reported they would *not* have preferred to leave a message if it would have taken LARC two or more days to call them back.

¹⁴ The Client Priority and Satisfaction Survey for LASOC was conducted by James Meeker of the University of California at Irvine.

The primary disadvantage of a warm-line is that it can be hard to reach people on call backs. For this reason, warm-lines may work better for seniors than for a general population because seniors may be easier to reach on call-backs than younger callers. Some Hotlines find that scheduled call-backs work best – telling callers that they should expect a call back the next day between 1:00 p.m. and 3:00 p.m., for example. Since some callers may not be able to receive a call-back at work, it may be necessary to conduct call-backs during the evening at least once a week.

Quality Control

Programs report a variety of mechanisms to promote quality control, including the use of reference and referral materials, training, supervision, and case note reviews.

Most programs have developed extensive reference manuals and referral sources for advocates. Some have developed scripts or protocols for the most common areas of inquiry. For example, the Legal Aid Society of Hawaii has developed 31 different scripts.

Typically, new staff will receive an initial training course, as well as on-the-job training. A common form of training is to pair a new call handler working with an experienced handler. Programs may supplement initial training with ongoing trainings in the form of weekly or monthly sessions on particular topics. These topics include substantive legal issues, but may also go beyond the legal realm. For example, Western Nebraska Legal Services had a workshop on active listening, and Statewide Legal Services of Connecticut had a session on useful teaching strategies.

Managers uniformly identify having a supervisor on call or available for consultation as a key to program quality. All Hotlines, but especially ones staffed by students or less experienced paralegals, stress to their advocates that, as one interviewee put it, “It is ok to say I don’t know and then find out.” It is not uncommon for an advocate to place a caller on hold and consult a backup attorney or a staff attorney who has expertise in a particular substantive area. This consultation may be done by going down the hall and finding that person or through an e-mail query, often sent out to everyone on staff.

In almost all the programs we interviewed, a managing attorney reviews the summaries of the advice given either for all cases or on a random basis. In one program, advice summaries are also reviewed on a random basis by a staff attorney who has expertise in a particular subject area. Based on these reviews, the supervisor may instruct an advocate to call someone back and correct or add to the original advice he or she provided.

Many Hotlines mail callers informational brochures or fact sheets or even personalized follow-up letters summarizing the advice provided. Many interviewees feel that Hotlines should provide callers a written summary when the information and advice is complicated. Advocates typically tell callers to phone back if they need more information in the future.

Limiting the types of issues handled by the Hotline can also serve as a method of quality control. Hotlines using pro bono attorneys are more likely to limit their issues than those using program staff. For example, the Central Virginia Legal Aid Pro Bono Hotline handles only four types of issues: consumer, employment, housing, and domestic. The managing attorney explained that they made this decision because: “One, you can’t expect a pro bono to know everything, and two, those case types are amenable to brief advice – there are lots of quick questions in those areas.” Of course, this approach curbs the primary benefit of a Hotline – increased accessibility of advice and brief services – for people with problems in areas that are not handled by the Hotline.

V. Conclusions

Phase I of the Hotline Outcomes Assessment Study involved detailed qualitative interviews with managers and directors of 44 Legal Hotlines and an analysis of caseload patterns for 16 programs that appear to have relatively stable pre- and post-Hotline environments, thus permitting reliable comparisons to be made. The results answer some (but not all) questions about the impact of a telephone-based system for the provision of advice and referral services and the format that they might take. The main findings of Phase I and the recommendations for Phase II are as follows:

Hotlines can be effective, but success is not guaranteed.

If effectiveness is defined as increasing capacity to provide brief service without reducing capacity to provide extended services, the quantitative analysis of 16 programs with

relatively comparable pre- and post-Hotline environments reveals a mixed picture. Six of the ten programs with budgets over \$1 million succeeded in increasing the level of brief services in the two post-Hotline years by more than 10 percent (all but one by much more than 10 percent), while remaining relatively stable (increase or less than 10 percent reduction) in their level of extended services. Among programs for which more than two years of post-Hotline data are available, the four programs with funding of over \$1 million were able to repeat that success in the two most recent years. In contrast, no program with a budget of less than \$1 million was able to achieve this goal. All programs, but especially smaller ones, should be extremely careful in implementing a Hotline if they do not want to cut into their capacity for extended services.

These conclusions must be viewed with some caution, given the limitations of the CSR data used in the quantitative analysis, the small group of programs studied, and the possibility that the results reflect factors other than the effect of the Hotline. For a program considering adopting a Hotline model, the most that can be claimed for this evidence is that it suggests that Hotlines *can* be effective, but that success is by no means guaranteed.

All executive directors and managers say the Hotline expanded capacity, productivity, and accessibility.

The value of this evidence is limited because it reflects the views of people who have made the decision to adopt the Hotline model. However, it is significant that the study did not identify any feeling that adopting the Hotline had been a mistake. The key benefit of the Hotline is its ability to make brief legal assistance available to more individuals with greater speed and convenience. The populations that are perceived to benefit the most are the elderly, the employed, rural residents, and individuals who have transportation or child care problems. Hotlines enable programs to handle many more intakes than they did using conventional, walk-in arrangements. Those who are ineligible for service get the news faster and sooner; those who are eligible get attention faster and earlier. For this reason, many feel that Hotlines promote early intervention and may prevent some legal problems from developing. More to the point, Hotlines are viewed as more effective ways to handle most requests for assistance, two-thirds of which have traditionally received advice and counsel, referral, or brief service.

Starting a Hotline takes a lot of money and time. Although there are often some initial staff resentments and concerns, these fade quickly once the Hotline is implemented and staff experience its efficiencies.

Hotlines require considerable investments of money, energy, and staff attention. In addition to acquiring phones and computer technology, staff must develop a database of referral sources, informational brochures and other mail-outs to assist callers, and scripts to guide less experienced advocates with commonly asked questions. By all accounts, start-up is challenging. Staff must be trained on the new technology, and programs are often overwhelmed by the higher volume of calls that they receive. Frequently, there is initial resistance to the Hotline and resentment of the resources it requires. Fortunately, however, these concerns typically fade once the Hotline is implemented. Most managers and executive directors report that the entire staff eventually supports the Hotline and appreciates its efficiencies.

Many different staffing arrangements and operational formats work well.

There is no consensus about the best staffing arrangement; most programs are partial to their own system. In addition to deciding on the type of legal worker to use on the Hotline, their level of substantive specialization, and their exclusive dedication to the Hotline as opposed to rotating on and off, programs have to decide whether to have calls go directly to legal advocates or to use screeners to do intake. They also have to make a variety of operational decisions like hours of operation, the use of automated answering systems, methods of servicing non-English speaking callers, and how to handle call-backs. There are many different arrangements that work well. Programs should pursue staffing arrangements and operational formats that best reflect local opportunities, resources, and needs.

Future research should focus on client satisfaction and outcomes.

The difficulties and limitations associated with the quantitative analysis suggest that there would be little benefit in further attempts to measure the effectiveness of Hotlines in comparison to traditional intake systems. However, analysis of the outcomes actually obtained for clients by Hotlines could provide some valuable guidance for how Hotlines are

staffed and structured. Although directors and managers are enthusiastic about Hotlines, they have questions about whether it works equally well for all types of clients and problems. Most of the research conducted so far has consisted of user satisfaction surveys with very low response rates. As such, client satisfaction surveys are of little, if any, value in assessing the effectiveness of Hotlines. Little is known about whether clients (1) understand the advice they are given, (2) follow up on it, and (3) realize some satisfactory resolution to their problems. As one interviewee put it, “The point of a Hotline is to give people tools they can use on their own behalf.” The looming question is whether callers are able to do so, or for which callers and tools and problems this is true and for which it is not. It is anticipated that this will be the focus of the Phase II study of Hotlines currently being planned by the Advisory Committee and researchers.

Appendix A

Interviewed Hotline Programs

Interviewed Hotline Programs

Legal Aid Society of Orange County, CA
Neighborhood Legal Services of Buffalo, NY
Legal Services Program for Pasadena and San Gabriel-Pomona Valley, CA
Central Virginia Legal Aid Society, VA
Western Nebraska Legal Services, NE
Knoxville Legal Aid Society, TN
Legal Aid of Central Michigan, MI
Northwest Florida Legal Services, FL
Northwestern Legal Services Central Intake Unit, PA
Southern New Mexico Legal Services Centralized Intake and Hotline, NM
Heart of Texas Legal Services Legal Advice and Referral Hotline, TX
Indian Pueblo Legal Services Hotline, NM
Center for Arkansas Legal Services Helpline, AR
Legal Assistance of North Dakota, ND
Legal Aid Society of Roanoke Valley Pro Bono Hotline, VA
Blue Ridge Legal Services, VA
Legal Services Program of Northern Indiana, IN
Northeast Ohio Legal Services, OH
East River Legal Services, SD
Virginia Legal Aid Society Telephone Assistance Project, VA
Southern Arizona Legal Aid Intake Hotline, AZ
Legal Aid of Western Oklahoma, Altus Law Center, OK
Legal Services of Northern Virginia Pro Bono Hotline, VA
Tidewater Legal Aid Society Pro Bono Hotline, VA
Nevada Legal Services, NV
Southern Tier Legal Services, NY
Community Legal Services, CA
Legal Aid Society of Hawaii Statewide Intake Hotline, HI

Capital Area Legal Services Corporation Legal Hotline, LA
Central Pennsylvania Legal Services, PA
Coastal Bend Legal Services Information and Assistance Hotline, TX
DNA-People's Legal Services, AZ
Legal Services Organization of South Central Michigan Helpline, MI
Legal Services of North Texas Advice and Referral Service, TX
Georgia Legal Services Telephone Intake and Screening, GA

Senior Hotlines

Legal Services of Northern California Senior Legal Hotline, CA
Legal Services for the Elderly Hotline, ME
Pro Seniors' Legal Hotline, OH
Legal Hotline for the Elderly, DC

Statewide Hotlines

Legal Services Law Line of Vermont, VT
Legal Advocacy and Resource Center (LARC), MA
Legal Advice and Referral Center, NH
Statewide Legal Service of Connecticut, CT
Northwest Justice Project's Coordinated Legal Education, Advice and Referral
(CLEAR), WA

Appendix B

Phase I

Interview Protocol

Phase I

Interview Protocol for Hotline Staff

Hi, I'm calling for the Project for the Future of Equal Justice. I work for the Center for Policy Research and we are conducting a study of Legal Aid Hotlines funded by the Project. Did you receive a letter from John Eidleman at LSC saying that we would be calling you? We are conducting interviews with Hotline directors to explore whether Hotlines enhance the capacity of legal services programs. We want to talk with you about whether you have any data that will help us gauge changes in productivity since the introduction of your Hotline. We are also interested in your perceptions of the benefits and limitations of a Hotline. The interview will take about an hour. Is this a good time? If no, when would be a better time?

Call Back:		
Day:	Date:	Time:

These interviews are part of the first phase of the study. Part of what we are doing in this phase is exploring what issues should be examined in Phase II of the research. So, at the end of our conversation I will ask you what issues you'd like to see examined in the second part of the study.

Date and Time of Interview

Name of Interviewee:

Hotline or Organization:

Position:

Address:

Telephone:

E-mail:

A. Hotline Definition

First I want to ask you a question to be sure that your Hotline meets the definition of a Hotline that we are using for the purposes of this research.

Does your system allow callers to talk directly to a legal worker who can analyze the caller's legal problem and provide legal advice, information, and possibly brief services at the time of the call, or with a return call? (Probe: do callers talk directly to an advocate? What percent of cases are resolved by the Hotline? Does this Hotline do more than telephone intake? Do all cases go through Hotline intake? Then what happens? What are lawyers doing? What are specialists doing? When is the decision made about taking a case?)

If no, in what way does your Hotline not fit this definition?

[END CALL HERE if it does not meet the definition of a Hotline.]

E. Community Setting and Scope of Service

Does the Hotline serve the entire population in the legal service area?

Are there any service limitations? (e.g., Certain types of legal problems? Certain demographic groups like elderly, Spanish-language? Certain counties or geographic sub-areas?)

Are there any other legal Hotlines that serve this service area?

Mostly urban or rural?

How long a drive from furthest point in area to your office?

F. Hotline History

[Confirm start date provided on phone list]

Hotline's first day of operation? ____/____/____

Stages of implementation? (Was the Hotline gradually phased in or did it start off providing full service for the full service area?)

Has there been a change in the legal service area served by the Hotline since its introduction?)

Last full year in which Hotline was not in operation at all?

First full year in which Hotline was in full operation?

G. Procedures

Can you walk me through how a case that comes into the Hotline is handled?

Phone System and Answering Method: (automated answering system)

Staffing: (Use of screeners, law students, paralegals and advocates). Are there intake and extended services attorneys?

Procedures: (Checking for conflicts, case acceptance decisions)

Services: Advice (types, were these callers served in pre-Hotline era?)

Referral Services: (Common referrals)

Extended Services: (Who makes the decision to provide extended services?)

Pro Se Assistance: (Pro se clinics? Manuals? Classes?)

Other Forms of Assistance: (Written materials? Letters and follow ups with clients?)

Accommodations for Walk-ins and Special Needs Groups (Emergencies? Non-English speakers? Hearing-impaired?)

What percent of your calls are handled with brief advice over the phone only?

H. Volume and Capacity

Hotline hours:

Toll-free #:

Average number of calls received per day?

How many calls can the Hotline handle at one time?

Do callers ever get a busy signal?

Hold time/Abandonment rate?

Can callers leave a message at any time if they don't want to wait on hold? How often do clients end up leaving a message? Do you have problems with callbacks?

I. Hotline Data

We are trying to figure out if Hotlines improve program productivity. Let's talk about the data you report to LSC.

We are planning to use LSC data to compare program performance before and after implementation of the Hotline. Do you see any significant problems with using LSC data as a way to evaluate program performance for pre and post-hotline years?

Go over dates for pre and post

Changes in service area in pre or post years?

We are aware of the fact that programs may change how they define and count cases in 1999 as a result of the recent self-assessment process. Have you been consistent in the way you count and report cases in past years so as to permit a comparison of caseload statistics prior to and following implementation of the Hotline?

Did you re-submit changed numbers to LSC for 1998?

Which numbers should we use of 1998? Pre or post self-assessment?

During pre and post time period -- have there been changes in:

Program priorities

How a Hotline case is defined? Whether a case is counted if the case is not accepted but phone advice is rendered or if information is sent? Self-help materials: Attendance at a workshop? What are other things you do at intake that don't count as a case?

How a client who returns with a different case type within the same year is counted?

Changes in:

Level of PAI services provided?

Have there been significant changes in your program that may affect the volume of cases you have handled prior to and following implementation of the Hotline? For example, during the three years preceding and following the introduction of your Hotline, were there significant changes in your funding (LSC, non-LSC, IOLTA, foundation, new funding services), your priorities, the initiation or termination of neighboring programs offering legal services, program mergers, changes in your executive director, changes in numbers of staff, loss of experienced staff, union strikes, office computerization, office moves or renovations?)

During this same time period, have there been significant changes in the community you serve that have affected the number of cases you handle? For example, in local laws? During the three years preceding and following the introduction of your Hotline, were there major plant closings that led to a surge in unemployment cases?

For programs for which we will be analyzing data from any source:

Can they give us total # of applications for pre and post years?

If using Their Data (not LSC data):

Can you give us data on:

Poverty population

cases/year

counted how? (Closed preferable) Closed only? Closed and open?

Service provided? (by CSR case type categories A-K and totals if possible)

PAI involvement

Yearly total budget

of attorneys (and other legal handlers)?

How about outcome data. Do you have any outcome fields on your Hotline system? What types of outcome codes do you have? Are they used regularly? When did you start recording outcomes for cases? Do you have the capacity to add outcome fields? Follow-up surveys?

Have you collected any client satisfaction data?

If yes, how was/is the information collected?

What is/was the response rate?

For what time period is your client satisfaction information available? Before and after the Hotline was introduced?

Could we get a copy of your survey instruments and any write-up you have based on your evaluation data?

J. Staffing

Number of different types of employees:

Type of Employee	Number paid	Number volunteer	Status at Legal Aid (Full-time/ part-time)	Status at Hotline (Full-time / part-time)	Duties: Intake/Extended Service
Attorneys					
Paralegals					
Law Students					
Receptionist					
Screeners					
Other:					

Are there any special staffing issues that come up with respect to a Hotline? (Recruiting? Retention? Burn-out? Training? Supervision?)

What are the advantages and disadvantages of the Hotline's staffing arrangement?

K. Perceived Impact of Hotline / Perceptions of Effectiveness

Since the implementation of the Hotline, have you experienced changes in:

The number and types of clients you serve?

Changes in types of cases handled?

Changes in types of services rendered? (E.g., brief services, extended services)

Changes in numbers of ineligible clients who phone and reasons for ineligibility?

Changes in client demographics? (Men in divorce or custody/visitation cases, employed people)

Are there any factors that we haven't discussed that might explain these changes in caseload patterns?

Do you think that the Hotline has affected your productivity/expanded your capacity?

Overall, what are the pros and cons of a legal Hotline?

For what groups and problems does the Hotline work best and least well? Are some issues/problems too complex and sensitive? Some demographic groups too dysfunctional? Domestic violence?

Do you think clients listen to and understand the advice they get? Follow up with the referrals they receive?

Have you heard any feedback from other staff about the Hotline and its benefits/drawbacks that we should know about? Are there pro and anti-Hotline factions within the staff?

Phase II

These interviews are a part of Phase I of the study of Hotline outcomes. Part of what we are doing in Phase I is coming up with issues to be examined in Phase II of the research. What questions would you like to see addressed in Phase II? (Is the advice useful? Do clients do what they are advised to do? Do they solve their problems?)

Further Interviews

What are key organizations or agencies that refer callers to Legal Services? Please provide a name and phone number for each referral source (e.g., Lawyer Referral Service, United Way Info Line, advocates for the poor, neighborhood and community organizations, social service providers)

Source of Referrals to Hotline		
Referring Agency/Organization	Contact Name:	Contact Phone #:

Would it be okay if I contacted you again in Phase II?

Thank you.

Appendix C

Case Service Report (CSR) Forms